		PENSE CLAIN	n				nd Privac	T.						
STD 262 (REV 10/92) Stateme						nt on Reverse Side SSAN OR EMPLOYEE NUMBER DEPARTM					Page	1	of	1
Francisco Castillo											 inications	-		
POSITION	oc odom			CB/ID NUMBE	R	DIVISION OF	R BUREAU			Comme	inications	INDEX NUMI	BER	
Deputy Press Secretary					HEADQUARTERS ADDRESS CITY STATE									
RESIDENCE ADDRESS										TELEPHONE NUMBER				
CITY STATE ZIP														
CITY STATE ZIP										ZIP				
						<u> </u>	T ===	T						
MONTH/YEAR LOCATION				MEALS	T	1		TF	CARFARE.	ON				
Nov-09		WHERE EXPENSES	LODGING				INCIDENTALS	COST OF		TOLLS,	PRIVATE CAR USE		BUSINESS	TOTAL
DATE	TIME	WERE INCURRED		BREAKFAST	LUNCH	DINNER		TRANS.	TYPE USED	PARKING	MILES	AMOUNT	_	FOR DAY
		0 1.437						1						
19-Nov	9AM	Sac- LAX	+			-		317.20		61.65	10	4.45		383.3
19-Nov	5:30PM	LAX - Sac								9.00	10	4 45		13.4
		 	 					<u> </u>		-				0.0
24-Nov	5 30AM	Sac-Bur	154 01			10.28	6 00	158 60		30.00	10	4.45		363.3
25-Nov	2 30PM	Bur-Sac						249.63		10.00	10		/	
20-1407	2.301301	Din-Oile					-	249 0.5		18.00	10	4.45	14 18	286.2
														0.0
			1											0.0
		100												0.0
		-	-		***************************************	-	-			-				0.0
			III Novembura									0.00		0.0
			-				-					0.00		0.0
												0.00	A	0.0
												0.00		
												0.00		0.0
												0.00		0.00
	SUBT	OTALS	154.01	0.00	0.00	10.28	6.00	725.43	0.00	118.65	40	17.80	14.18	
COLUMN		ACCTG. USE ONL'									10	17.00	14.10	
													01.0	
		TOTAL												16.35
		IP, REMARKS AND					red)				NORMAL \	NORK HOU	JRS	
		overnor's Press C		e re: Race	e to the	Гор				-				
11/24-2:	5: Starre	d Governor in LA									PRIVATE	VEHICLE L	ICENSE NI	JMBER
									-	.				
											MILEAGE RATE CLAIMED			
											AGENCY ACCOUNTING OFFICE			
LUEDEDY 3	SEDIUS TE	at the above is a true stat	ement of the	Iraval aveces	as incurred t	ov me in coc	rdancoth F	DA rulos is il	ha sames -	Ibo Ctate	AGENC			PERIOE
		owned vehicle was used a									NAIN ET	USE		
	88	med, and that I have met								squai (U UI	PAID BY	REVOLVING F	OND CHECK	NUMBER
		ety and seat belt usag.	trie requireme	ents as prescri	bed by SAN	Sections of	30, 0731,073	2, 0755 and 0	7754		\mathcal{O}	40	82	$\rangle/$
AIMAN-10	CICNATIDE				DATE	1	SIGNATURE	20 TO 1		VEL AND	PAYMENT		DATE	•
1			_		12/1	Alna	1						1/1/1	
		5-Spile on a graph contribution			- 1	1101	<u></u>						1771	<u> </u>
SIGNATURE	OF IIT		. EAPE `										DATE '	1
													1/61	10